

National Rifle Association of America Political Victory Fund

11250 Waples Mill Road

Fairfax

VA

22030

FEC ID No. C00053553

☐ 24-Hour Notice ☒ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553	
Check if <input type="checkbox"/> 24-hour notice <input checked="" type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 1 0	
Mailing Address 11250 Waples Mill Road		Amount 1143.46	
City Fairfax	State VA	Zip Code 22030	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> Presidential
Purpose of Expenditure Prepay Salary / Benefits		Category/ Type 001	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Stivers		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		Transaction ID: 36935156	

Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 1 0	
Mailing Address 11250 Waples Mill Road		Amount 1143.45	
City Fairfax	State VA	Zip Code 22030	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> Presidential
Purpose of Expenditure Prepay Salary / Benefits		Category/ Type 001	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Rep. Patrick J. Tiberi		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		Transaction ID: 36935157	

(a) SUBTOTAL of Itemized Independent Expenditures	2286.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Mary Rose Adkins Signature	M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 1 0

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount

2300.22

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: VA

☐ Senate

District: 11

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: 36935158

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount

1130.32

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: MO

☐ Senate

District: 03

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: 36935159

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

3430.54

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 1 0

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SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount

1130.33

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☐ House

State: MO

☒ Senate

District: _____

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: 36935160

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount

1725.62

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☐ House

State: WA

☒ Senate

District: _____

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: 36935161

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

2855.95

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 1 0

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount

575.20

City State Zip Code
Fairfax VA 22030Purpose of Expenditure
Prepay Salary / BenefitsCategory/
Type 001Office Sought: ☒ House State: WA
☐ Senate District: 03
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
Jaime HerreraDisbursement For: ☐ Primary ☒ General 2010
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 0.00

Transaction ID: 36935162

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount

2331.08

Mailing Address
11250 Waples Mill Road
City State Zip Code
Fairfax VA 22030Purpose of Expenditure
Prepay Salary / BenefitsCategory/
Type 001Office Sought: ☒ House State: PA
☐ Senate District: 15
☐ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:
Mr. Charles DentDisbursement For: ☐ Primary ☒ General 2010
☐ Other (specify) : _____Calendar Year-To-Date Per Election
for Office Sought 0.00

Transaction ID: 36935163

(a) SUBTOTAL of Itemized Independent Expenditures

2906.28

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 1 0

24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

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☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)
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Check if <input type="checkbox"/> 24-hour notice <input checked="" type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 1 0	
Mailing Address 11250 Waples Mill Road		Amount 2303.49	
City Fairfax	State VA	Zip Code 22030	
Purpose of Expenditure Prepay Salary / Benefits	Category/ Type	001	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Richard M. Burr		Office Sought: <input type="checkbox"/> House State: NC <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____	
		Transaction ID: 36935164	

Full Name (Last, First, Middle, Initial) of Payee National Rifle Association of America		Date M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 1 0	
Mailing Address 11250 Waples Mill Road		Amount 2286.91	
City Fairfax	State VA	Zip Code 22030	
Purpose of Expenditure Prepay Salary / Benefits	Category/ Type	001	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Thomas Ganley		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> Presidential	
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____	
		Transaction ID: 36935165	

(a) SUBTOTAL of Itemized Independent Expenditures	4590.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
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Mary Rose Adkins Signature	M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 1 0

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C C00053553

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Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount

2208.16

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: OH

☐ Senate

District: 01

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: 36935166

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount

2338.35

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: NH

☐ Senate

District: 01

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: 36935167

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

4546.51

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 1 0

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NAME OF COMMITTEE (In Full)
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FEC IDENTIFICATION NUMBER

C C00053553

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount

2352.00

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: KS

☐ Senate

District: 03

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: 36935168

Calendar Year-To-Date Per Election

0.00

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

National Rifle Association of America

Date

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount

2279.18

Mailing Address

11250 Waples Mill Road

City

Fairfax

State

VA

Zip Code

22030

Purpose of Expenditure

Prepay Salary / Benefits

Category/
Type

001

Office Sought:

☒ House

State: PA

☐ Senate

District: 07

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: 36935169

Calendar Year-To-Date Per Election

0.00

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

4631.18

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

25247.77

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins

Signature

M M / D D / Y Y Y Y
0 9 / 2 9 / 2 0 1 0